



State of Washington
Application for a Water Right

Please follow the attached instructions to avoid unnecessary delays.

RECEIVED
JUL 3 1997
For Ecology Use
Fee Paid \$10.00
Date 7-3-97
ck#0114

Section 1. APPLICANT - PERSON, ORGANIZATION, OR WATER SYSTEM

Name TRAMWAY WATER ASSOCIATION Home Tel: (509) 935-8857
Mailing Address 2714 E QUARRY-BROWNS LK RD Work Tel: () - -
City CHEWELAH State WA Zip +4 99109 + FAX: () - -

Section 2. CONTACT - PERSON TO CALL ABOUT THE APPLICATION

☐ Same as above

Name WILLIAM R. STRINGER Home Tel: (509) 935-4250
Mailing Address 2720 QUARRY-BROWNS LK RD Work Tel: () - -
City CHEWELAH State WA Zip +4 99109 + 9633 FAX: () - -
Relationship to applicant PRESIDENT

Section 3. STATEMENT OF INTENT

The applicant requests a permit to use not more than (175 gpm) (☒ gallons per minute or ☐ cubic feet per second) from a ☐ surface water source or ☒ ground water source (check only one) for the purpose(s) of 64.3 ACRE FEET PER YR. FROM APRIL 1 TO OCT 1 EACH YR FOR THE IRRIGATION OF 20 ACRES; 12.6 ACRE FEET PER YR CONTINUOUSLY FOR GROUP DOMESTIC SUPPLY. ATTACH A "LEGAL" DESCRIPTION OF THE PLACE OF USE. (See instructions.) NOTE: A tax parcel number or a plat number is not sufficient.

Estimate a maximum annual quantity to be used in acre-feet per year: 76.9
(CONTINUOUS MULTIPLE DOMESTIC SUPPLY FOR 14 HOMES; AND SEASONAL IRRIGATION FOR 20 ACRES)
☐ Check if the water use is proposed for a short-term project. Indicate the period of time that the water will be needed:

From / / to / /
N 1/2 NW 1/4, W 1/2 NE 1/4 NE 1/4, NW 1/4 NE 1/4 AND THAT PORTION OF THE S 1/2 NE 1/4 LYING NORTH OF MAGNESITE QUARRY ACCESS COUNTY ROAD, COMMONLY KNOWN AS BROWNS LAKE ROAD, ALL IN SEC. 28, T. 32N., R. 40 E.W.M., STEVENS COUNTY, WASHINGTON

Section 4. WATER SOURCE

If SURFACE WATER	If GROUNDWATER
Name the water source and indicate if stream, spring, lake, etc. If unnamed, write "unnamed spring," "unnamed stream," etc.:	A permit is desired for <u>(1)</u> well(s).
Number of diversions: <u> </u>	
Source flows into (name of body of water):	Size & depth of well(s): <u>243 FEET WITH 8" STEEL CASING</u>

LOCATION

Enter the north-south and east-west distances in feet from the point of diversion or withdrawal to the nearest section corner: 1220 FEET SOUTH AND 760 FEET WEST FROM THE NE CORNER OF SEC. 28

1/4 of	1/4 of	Section	Township	Range(E/W)	County	If location of source is platted, complete below:		
						Lot	Block	Subdivision
<u>(W 1/2)</u>	<u>NE 1/4</u>	<u>28</u>	<u>32</u>	<u>40E</u>	<u>STEVENS</u>			

For Ecology Use Date Received: 7-3-97 Priority Date: 7-3-97
SEPA: Exempt Not Exempt FERC License # Dept. Of Health #
Date Accepted As Complete 8/20/98 By LK Date Returned By WRIA: 59

Section 5. GENERAL WATER SYSTEM INFORMATION

- A. Name of system, if named: TRAMWAY WATER ASSOCIATION
- B. Briefly describe your proposed water system. (See instructions.) THE EXISTING WATER SYSTEM CONSISTS OF APPROXIMATELY 3,000 FEET OF 3 INCH SCHEDULE 40 PVC PIPE, CURRENTLY SERVING ELEVEN FAMILIES WITH A POSSIBILITY OF IRRIGATING 20 ACRES OF FARM LAND. THE SYSTEM IS POWERED BY A 20 HP SUBMERSIBLE PUMP AT THE WELL AND ONE 7 1/2 HP CENTRIFUGAL BOOSTER PUMP LOCATED APPROXIMATELY 2,000 FEET FROM THE MAIN PUMPHOUSE. STORAGE CONSISTS OF 3 - 1,000 GALLON CISTERNS AND 6 AIR PRESSURE TANKS OF APPROXIMATELY 100 GALLONS EACH. DOMESTIC USERS ARE ENCOURAGED TO USE LOW-FLOW HOUSEHOLD FIXTURES TO CONSERVE WATER.
- C. Do you already have any water rights or claims associated with this property or system? ☒ YES ☐ NO
PROVIDE DOCUMENTATION. DEPT OF ECOLOGY CERTIFICATE # 63-27434C 12/30/82 AND CERTIFICATE # 63-26008C 7/12/78.

Section 6. DOMESTIC / PUBLIC WATER SUPPLY SYSTEM INFORMATION (Completed for all domestic/public supply uses.)

- A. Number of "connections" requested: 14 Type of connection HOMES
(Homes, Apartment, Recreational, etc.)
- B. Are you within the area of an approved water system? ☐ YES ☒ NO
If yes, explain why you are unable to connect to the system. Note: Regional water systems are identified by your County Health Department.

Complete C. and D. only if the proposed water system will have fifteen or more connections.

- C. Do you have a current water system plan approved by the Washington State Department of Health? ☐ YES ☐ NO
If yes, when was it approved? _____ Please attach the current approved version of your plan.
- D. Do you have an approved conservation plan? ☐ YES ☐ NO
If yes, when was it approved? _____ Please attach the current approved version of your plan.

Section 7. IRRIGATION/AGRICULTURAL/FARM INFORMATION (Complete for all irrigation and agriculture uses.)

- A. Total number of acres to be irrigated: 20
- B. List total number of acres for other specified agricultural uses:
- | | |
|-----------|-------------|
| Use _____ | Acres _____ |
| Use _____ | Acres _____ |
| Use _____ | Acres _____ |
- C. Total number of acres to be covered by this application: 20
- D. Family Farm Act (Initiative Measure Number 59, November 3, 1977)
Add up the acreage in which you have a controlling interest, including only:
‡ Acreage irrigated under water rights acquired after December 8, 1977;
‡ Acreage proposed to be irrigated under this application;
‡ Acreage proposed to be irrigated under other pending application(s).
- Is the combined acreage greater than 2000 acres? ☐ YES ☒ NO
 - Do you have a controlling interest in a Family Farm Development Permit? ☐ YES ☒ NO
If yes, enter permit no: _____
- E. Farm uses:
Stockwater - Total # of animals _____ Animal type _____ (If dairy cattle, see below)
Dairy - # Milking _____ # Non-milking _____

Section 8. WATER STORAGE

Will you be using a dam, dike, or other structure to retain or store water?

☐ YES ☒ NO

NOTE: If you will be storing 10 acre-feet or more of water and/or if the water depth will be 10 feet or more at the deepest point, and some portion of the storage will be above grade, you must also apply for a reservoir permit. You can get a reservoir permit application from the Department of Ecology.

Section 9. DRIVING DIRECTIONS

Provide detailed driving instructions to the project site.

FROM CHEWELAH TAKE 395 SOUTH 2 1/2 MILES TO QUARRY-BROWNS LAKE ROAD. TURN RIGHT AND GO 2 MILES WEST TO WELL WHICH IS LOCATED ON N SIDE OF QUARRY-BROWNS LAKE ROAD.

Section 10. REQUIRED MAP

A. Attach a map of the project. (See instructions.)

SEE ATTACHED

Section 11. PROPERTY OWNERSHIP

A. Does the applicant own the land on which the water will be used?

☐ YES ☒ NO

If no, explain the applicant's interest in the place of use and provide the name(s) and address(es) of the

owner(s): A NONPROFIT ORGANIZATION FORMED FOR THE PURPOSE OF SERVICING & MAINTAINING A WATER SYSTEM TO PROVIDE WATER FOR DOMESTIC USE TO THE FOLLOWING MEMBERS.

FRANK + TARRI ABELL, 2674 QUARRY-BROWNS LK RD, CHEWELAH, WA; 2686 QUARRY-BROWNS LK RD; GENE + BETSY WILLIAMS, 2694 QUARRY-BROWNS LK RD; JOHN + MARY JEAN HERDA, 2714 QUARRY-BROWNS LK RD; DAN + SUE RICHART, 2714E QUARRY-BROWNS LK RD; DANIEL + BARBARA SCHROCK, 2714F QUARRY-BROWNS LK RD; DAVE + ANITA PALUCK, 2714C QUARRY-BROWNS LK RD + LOT T-B OF SHORT PLAT SP 134-81; RICK + SHELLEY ERICKSON, 2714D QUARRY-BROWNS LK RD; BILL + LOUISE STINGER, 2720 QUARRY-BROWNS LK RD; RAY + JEANNE PERDUE, 2742 QUARRY-BROWNS LK RD. PROPOSED: LOTS A+B OF SHORT PLAT SP 131-94, LOYDE + PHYLLIS BRADY, PO BOX 65, MARCUS, WA 99151 AND ONE FUTURE

SHORT PLAT OF LOT C OF SP 131-94, FRANK + TARRI ABELL, 2674 QUARRY-BROWNS LK RD, CHEWELAH, WA 99109.

B. Does the applicant own the land on which the water source is located?

☒ YES ☐ NO

If no, submit a copy of agreement:

I certify that the information above is true and accurate to the best of my knowledge. I understand that in order to process my application, I grant staff from the Department of Ecology access to the site for inspection and monitoring purposes. Even though I may have been assisted in the preparation of the above application by the employees of the Department of Ecology, all responsibility for the accuracy of the information rests with me.

William R Stinger, PRESIDENT OF ASSN.
Applicant (or authorized representative)

Date

7-1-97

Landowner for place of use (if same as applicant, write "same")

Date

we examined this application
required by SDPA and find that
it is not an "action".

9/3/98 X not an "action".
L. Kiefer

APPLICATION

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Use this page to continue your answers to any questions on the application. Please indicate section number before answer.

We are returning your application for the following reason(s):	
_____ Examination fee was not enclosed	APPLICANT PLEASE RETURN TO CASHIER, PO BOX 5128, LACEY, WA 98509-5128
_____ Section number(s) _____ is/are incomplete	APPLICANT PLEASE RETURN TO THE APPROPRIATE REGIONAL OFFICE
Explanation:	
Please provide the additional information requested above and return your application by _____ _____ (date).	

Ecology staff _____ Date _____

To receive this document in alternative format, contact Lisa Newman at (360) 407-6604 (Voice) or (360) 407-6006 (TDD).

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